

September 24, 2021

**Frequently Asked Questions: Mondovi Community Meeting 6-7 PM 9/22/2021**

**Buffalo County Department of Health & Human Services (BCDHHS)**

Questions were answered during the meeting by Josie Knauber, BCDHHS Health Officer/Public Health Supervisor, Tom Bilski, Buffalo County DA and Corporation Counsel, and Jeff Rykal, Mondovi School District Superintendent.

\*Please note, all questions received to [COVID19@co.buffalo.wi.us](mailto:COVID19@co.buffalo.wi.us) with the subject line “Mondovi Community Meeting” before 9/22 at 6 PM were included in this document. Additionally, questions received in the chat box feature between 6 and 7 PM during the meeting were included in this document. If you do not see your question, but you submitted it before 9/22 at 6 PM or in the chat box between 6 and 7 PM during the meeting, please let us know, and we will provide you with an answer. Thank you for seeking clarity.

- 1. At what point would the health department ask that the school district require masking for all students?**
  - a. BCDHHS has always recommended masking in schools per CDC guidance starting when the initial guidance was provided last year.
  - b. BCDHHS cannot, under current circumstances, create an order for masking.
  - c. If you would like to see masking be mandated in your school district, the school board has the authority to do so. Please reach out to your school board and ask them to create a masking mandate for the district.
  
- 2. What public health indicators need to be met before Buffalo County Health and Human Services would step in and institute universal making in the Mondovi School?**
  - a. BCDHHS cannot, under current circumstances, create an order for masking.
  - b. The public health indicators that could be used are case activity, characteristics of the Delta variant, vaccination status of the community, etc.
  - c. BCDHHS is willing and ready to work with the school to identify indicators if they would like to mandate masks within their district.

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- 3. With COVID cases rising in Buffalo County why can't the county mandate that the schools be mandated to wear masks, especially for kids who are too young to be vaccinated? Does the Buffalo County Health department have the authority to make masks mandatory within the schools? I know the school board usually makes those type of decisions, however with our numbers rising in the community; I'd be interested to know if the health department could intervene and make the decision to make masks mandatory while at school?**
- BCDHHS cannot, under current circumstances, create an order for masking.
  - Given the number of students who are not able to choose to be protected with the vaccination at this time, BCDHHS continues to recommend and encourage the wearing of masks.
  - Ultimately, you make the choice to mask yourself or your child.
  - Talk to your loved ones to encourage them to wear a mask as well.
- 4. What can you tell us about the health of communities who are implementing universal masking in schools versus the communities that do not?**
- Currently, there is not available data that shows the effects that masking policies in schools have on community transmission.
  - This school year there are a number of factors that are different since last school year, so we want to look at data from this year, not last year.
    - Factors that have changed include vaccination status and the Delta variant being much more contagious than any other strain of COVID-19.
  - Being that we're just about a month into this year's school year, we just don't have that data yet.
  - BCDHHS continues to watch for data to come out that evaluates this.
  - Given current data on masking in general, BCDHHS knows that masks are an effective way to reduce the community transmission of COVID-19.
- 5. What does the county consider to be a "close contact" exposure?**
- If any of the following situations happen while you spent time with an individual with COVID-19, even if they don't have symptoms, you are considered a close contact.
    - You were within 6 feet of a person that has COVID-19 for a total of 15 minutes or more over a 24 hour period.
      - i.e., within the same day, being within 6 feet of an individual with COVID-19 five minutes each encounter a total of three times in a 24

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hour period.

- b. If you had direct exposure with respiratory droplets from a person with COVID-19.
    - i. i.e., being coughed or sneezed on, sharing a drinking glass, utensils, towels, or other personal items
  - c. If you had direct physical contact with a person with COVID-19.
    - i. i.e., hug, kiss, handshake, high five
  - d. If you cared for a person who has COVID-19.
  - e. You lived or live with a person who has COVID-19. (Some exceptions may apply.)
  - f. You stayed overnight with them in the same household for at least one night.
- 6. What is the process of identifying close contacts? Who's decision is it to quarantine an entire classroom of students when there is 1 positive case or an entire team? I find it very hard to believe that approx 20 kids are all close contacts to each positive case...so therefore that would mean that they each were within 6 feet of the positive case/person for 15 mins or more in a 24 hour period. These protocols also need to be re-evaluated after almost 2 years...we have more data now. We are continuing to send too many healthy kids home. There's got to be a better/smarter way to do this to keep more kids in school learning in person, not virtual & no more falling more behind.**
- a. When someone tests positive for COVID-19, BCDHHS is notified.
  - b. Once BCDHHS has conducted the initial interview with the positive individual, BCDHHS will notify the school of a positive case.
  - c. The school is most accurately able to identify close contacts in the school as they know the student's routine, and can work with teachers, coaches, and bus drivers. Schools may be able to look at video feed (from busses and sporting events) to help identify contacts in some circumstances.
  - d. Once a school identifies the close contacts, they send a list to BCDHHS, who will then send out the quarantine order to the families.
  - e. BCDHHS is taking the most current recommendations from CDC and Wisconsin DHS to inform decision making.
- 7. If a child does not have direct contact exposure, why do they have to quarantine? For example, an entire class had to quarantine for a non-direct exposure. Was that necessary?**
- a. Being a close contact does not mean you have to have had direct contact. The virus can spend time in the air and other people can inhale it or touch it on surfaces, touch their

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hand, mouth, or eyes and become infected.

- i. i.e., If you are standing next to someone in a choir who is singing, or are in a car where the person next to you is coughing, it is likely that they are going to expire some respiratory excretions that you could inhale or pick up from other surfaces.

**8. I thought it was close contacts that had to quarantine. There's no way that all of them are that close long enough. Why is an entire class having to be quarantined?**

- a. BCDHHS and the schools take indirect exposure pieces into consideration for these scenarios.
  - i. Students are getting up and interacting with each other a lot, not wearing a mask, sharing a lot of items.

**9. After nearly 2 years of data collection, what information can you share on the average days from exposure to symptom start? Example: 0-24 hrs: \_\_%, 24-48 hrs: \_\_%, 48-72 hrs: \_\_%. What percentage of individuals in our county who are close contacts and put into the Quarantine protocol end up coming positive with Covid-19 while quarantined?**

- a. From data collected throughout the pandemic, it has shown that a 14-day quarantine continues to be best practice.
- b. BCDHHS does not have data to provide for "Example: 0-24 hrs: \_\_%, 24-48 hrs: \_\_%, 48-72 hrs: \_\_%."
- c. BCDHHS does not have data to provide exact statistics on the percentage of individuals in Buffalo County who are close contacts and put into the quarantine protocol that end up being positive with COVID-19 while quarantined.
- d. New criteria released several months ago presented shortened quarantine options after the risk level of someone developing COVID-19 after 10 days and 7 days of exposure was deemed safe enough as long as other prevention measures were followed.
  - i. 10 Day Quarantine: Quarantine through the end of day 10 and return to normal activity on day 11 if without symptoms AND continue to wear a mask and social distance for the full 14-day quarantine.
  - ii. 7 Day Quarantine: Quarantine through the end of day 7, test on day six or seven and with a negative test resume normal activities on day 8 if without symptoms AND continue to wear a mask and social distance for the full 14-day quarantine.

**10. Why are parents being allow to decide when a student without symptoms that has been a close contact of someone who tested positive for COVID can go back to school. Since we know that you can still have COVID and be asymptomatic, why are we not requiring a negative test to return your school? Why is Buffalo County not following CDC guidance regarding "Options to reduce quarantine using symptom monitoring and diagnostic testing" which would reduce quarantine from 14 days to 7 if a diagnostic specimen is negative and no symptoms were reported during daily monitoring?**

- a. BCDHHS allows shortened quarantine unless a person's school or workplace cannot ensure the following measures: wearing a mask, maintaining six feet of physical distance – which means you cannot participate in any activity that brings you within six feet of another person, and avoiding crowds.
- b. Right now BCDHHS knows that the risk is lower after 10 days of being quarantined if the child remains asymptomatic, but there still is some risk for the rest of the quarantine. That's why we implement the masking and social distancing requirements.
- c. BCDHHS is requiring a negative test to return to school if the child chooses a seven-day quarantine option. That test needs to be completed on day six or day seven and needs to have the results as negative before they can return to school.

**11. Why is it okay for people to go back out into public a after a negative test, after seven, but our children cannot return to school with a negative test.**

- a. Shortened quarantine options may not be available to an individual or child if their school or workplace cannot ensure the following measures: wearing a mask, maintaining six feet of physical distance, and avoiding crowds. If this is the case, an individual must fulfill a 14-day quarantine period.
- b. If your child in elementary school is able to meet the shortened quarantine requirements outside of school they don't have to quarantine outside of school, as long as they get their negative test on day six or seven and continue to wear mask and social distance.

**12. Why can't children go back to school after 7 or 10 days of being symptom free?**

- a. Not every school can accommodate the CDC's shortened quarantines stipulations for all students for the reasons mentioned in question 9. These are, however, allowed to go back into public with no issues, as long as:
  - i. They don't have symptoms after day 10 OR

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- ii. They don't have any symptoms after day 7 and receive a negative test on day 6 or 7

**13. With a survival rate of 99%, why are you putting such strict restrictions on the virus versus no restrictions other than monitoring for symptoms with the flu, pertussis, et cetera? Why are there mass quarantines for Covid in the first place? We don't mass quarantine for the Flu, etc. Students who are ill are supposed to be kept home and symptom free for I believe 24 hours. Other than Covid maybe being more contagious why is this any different? If we have to Quarantine for COVID-19 why are we not doing the same for any other Respiratory Infections/Illness. Why can't common sense and if you are ill and showing symptoms you stay home till test and if negative you come back into civilization.**

- a. BCDHHS is not only working to prevent death from COVID-19, but also the COVID-19 illness itself. Some people are at risk for long-term side effects of COVID. BCDHHS doesn't want people to get sick and infect other people and contribute to the spread that's contributing to long-term illness and death from COVID.
- b. There are several mitigation strategies that are recommended to prevent flu, pertussis and other diseases. These mitigation strategies include influenza and pertussis vaccines, hand hygiene, cleaning and disinfecting, testing, and identification of close contacts in some diseases like pertussis. So, these mitigation strategies have been done historically.
- c. All illnesses are unique and require different response. Please use this link to learn more about different communicable diseases:

<https://www.dhs.wisconsin.gov/disease/communicable.htm>

**14. What are the statistics of people who actually contract COVID while they are on their 14 day quarantine for being close contact?**

- a. Though we are not able to tell you a specific statistic of people who turn positive after their 14 day quarantine, we do know that the Delta variant is twice as contagious.
- b. Everyone who is becoming sick with COVID was exposed somewhere, but maybe was not identified as close contact.
- c. It is important that we take all of these mitigation measures seriously even though we do not have exact statistics.

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**15. What does a threshold of positive tests in the community have to be in order for the, for school to be cancelled?**

- a. BCDHHS doesn't have a specific threshold of positive tests in the community for school to be canceled. That is a strategy that BCDHHS only wants to put in place if absolutely necessary, and it's not something that BCDHHS has considered doing yet.
- b. Mondovi School District was closed earlier in the year to put more mitigation strategies in place in order for less students to be exposed while they're at school so that we can keep more kids in school and safely.
- c. BCDHHS is constantly thinking about how to keep the kids and everyone in our community safe.

**16. Were close contacts placed under an official public health quarantine order or just actual positive cases?**

- a. Quarantine orders went to close contacts. No orders were sent to positive cases.

**17. Why did the county feel it was necessary to send a letter to the school district threatening the district and parents/guardians? What is the justification for the quarantine guidelines?**

- a. BCDHHS responded by putting orders in place for every child identified as a close contact, because it is unsafe for people exposed to COVID to come back to school during their quarantine period. We know that those people have a higher chance of transmitting COVID to others and making them sick.
- b. Through consultation with corporation counsel, Mondovi School, other public health partners and the BCDHHS Public Health staff, it was decided that the best course of action to ensure student safety was to create individual orders.

**18. How long is this order for?**

- a. It is not one overarching order but rather many individual orders for each student to be quarantining. The order applied to an individual will last as long as that person's quarantine lasts.

**19. How far into the future do you anticipate you will continue to quarantine close contacts?**

- a. Quarantine of close contacts will happen until CDC, Wisconsin DHS, and BCDHHS recommends otherwise. If anything changes, BCDHHS will be sure to update the community.

**20. What exactly are the charges of contempt going to be?**

- a. Wis. Stat. Ch 252 and Wis. Admin. Code DHS Ch. 145 give local and state health departments the authority to control communicable diseases and contagious medical conditions by use of isolation and quarantine procedures. It also requires a school to report and help the local health officer, which includes requiring a principal or nurse serving the school or any daycare center to notify the local health officer of any cases of communicable diseases including close contacts.
- b. If people fail to comply with the health department's directives, then corporation council will petition to the court to begin the legal proceedings in order to get the school or the school district to comply with the orders.

**21. Why the threat of legal action, ie. "Contempt charges" in a situation that is merely and as stated by the CDC and by your own post on the Facebook announcement on behalf of the BCDHHS, a "recommendation" for quarantine procedure?**

- a. This recommendation was enabled to be an order by Wis. Stat. Ch 252 and Wis. Admin. Code DHS Ch. 145, which gives local and state health departments the authority to control communicable diseases and contagious medical conditions by use of isolation and quarantine procedures.
- b. Through consultation with corporation counsel, Mondovi School, other public health partners and the BCDHHS Public Health staff, it was decided that the best course of action to ensure student safety was to create individual orders, which could result in corporation council petitioning the court to begin the legal proceedings in order to get the school or the school district to comply with the orders.

**22. As parents we have the inherent right and more importantly, the responsibility to do what is deemed proper to the best of our individual knowledge in regards to the education of our own children. The unstable environment that presents when sending dozens of healthy kids home to an unknown learning or even physical location during mass quarantine procedures is of concern. This disruption of continuity in education over the last school years has shown irrefutable evidence of lower testing scores, but more importantly, loss of confidence and significantly higher rates of mental health concerns in our younger populations. At what cost are these 'quarantine procedures' benefitting our children?**

- a. BCDHHS is working to keep the kids in this community safe. There are multiple elements of safety: mental health, physical health, etc. BCDHHS works to incorporate all elements of safety when making decisions. COVID-19 is a real threat to the safety of children in

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our community. It is essential that students who had an exposure be quarantined in order to limit the risk of spreading illness to others.

- b. Currently, BCDHHS offers the Botvin LifeSkills program to 3rd-5th graders in the Fall and 6th graders in the spring. This highly effective curriculum has been proven to help increase self-esteem, develop healthy attitudes, and improve their knowledge of essential life skills – all of which promote healthy and positive personal development and mental health. LifeSkills Training is comprehensive, dynamic, and developmentally designed to promote mental health and positive youth development.
- c. BCDHHS also is offering SOS (signs of suicide) to all high school and middle school students this year (2021-2022) the goals of this program are:
  - i. Increasing student knowledge and adaptive attitudes about depression
  - ii. Encourage personal help-seeking and/or help-seeking on behalf of a friend
  - iii. Reduce the stigma of mental illness and acknowledge the importance of seeking help or treatment
  - iv. Engage parents and school staff as partners in prevention through “gatekeeper” education
  - v. Encourage schools to develop community-based partnerships to support student mental health
- d. BCDHHS, in partnership with the Buffalo County Partnership Council, offers 1-2 community nights a year that revolve around the topics of adverse childhood experiences (ACEs) and mental health.
  - i. They are free for all parents to attend and always recorded for parents who may not be able to attend.

**23. First and foremost, please understand that I would like our students, staff and community to be as safe and healthy as possible. Understanding this virus isn’t going away and the mortality rate is so extremely low it’s almost nonexistent at what point do we realize we are harming the students more by quarantining them? Our students are falling behind academically and socially at an alarming rate. At what point is enough, enough? How can we quantify and compare the Covid exposures, positive test results and student/staff health to how far our kids are falling behind and the social and mental issues this is causing?**

- a. BCDHHS is working to keep the kids in this community safe. There are multiple elements of safety: mental health, physical health, etc. BCDHHS works to incorporate all elements of safety when making decisions. COVID-19 is a real threat to the safety of children in

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our community. It is essential that students who had an exposure be quarantined in order to limit the risk of spreading illness to others.

- b. Enough will be enough when we benefits outweigh risks. There is still high risk from close contacts not quarantining.
- c. BCDHHS will look for any data and science that is relevant and credible to aid in decision making for students' health.
- d. Currently, BCDHHS offers the Botvin LifeSkills program to 3rd-5th graders in the Fall and 6th graders in the spring. This highly effective curriculum has been proven to help increase self-esteem, develop healthy attitudes, and improve their knowledge of essential life skills – all of which promote healthy and positive personal development and mental health. LifeSkills Training is comprehensive, dynamic, and developmentally designed to promote mental health and positive youth development.
- e. BCDHHS also is offering SOS (signs of suicide) to all high school and middle school students this year (2021-2022) the goals of this program are:
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  - i. They are free for all parents to attend and always recorded for parents who may not be able to attend.

**24. Why does the Buffalo County Health and Human Services feel the need to step in and overrule the Mondovi school board and ultimately the school district from making their own decisions? The overwhelming majority of community members in attendance want our kids in school.**

- a. It is the role of the Health Officer to promptly take all measures necessary to prevent, suppress and control communicable diseases. This is not a discussion of wants but rather what is needed to keep children and the community safe. We all want the

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children and community safe.

**25. We need to have as many students in school as possible. What is the county's plan to get kids out of quarantine and back in school? The current guidelines are NOT working. There are far too many kids being quarantined leading to a massive amount of school time being missed.**

- a. Although some students are missing school due to quarantine, quarantine is protecting the health and safety of every child and staff member at the school. That is the ultimate goal. Other mitigation measures (ex. Masking, vaccination, etc.) could keep more kids in school by reducing spread.

**26. The county health department does not have the force of law. They are a non-elected department. They cannot constitutionally create or enforce law. An "order" is not a law. So what will the consequences be if we don't follow this "order"? And is it enforceable?**

- a. Wis. Stat. Ch 252 and Wis. Admin. Code DHS Ch. 145 give local and state health departments the authority to control communicable diseases and contagious medical conditions by use of isolation and quarantine procedures. It also requires a school to report and help the local health officer, which includes requiring a principal or nurse serving the school or any daycare center to notify the local health officer of any cases of communicable diseases including close contacts.
- b. If people fail to comply with the health department's directives, then corporation council will petition to the court to begin the legal proceedings in order to get the school or the school district to comply with the orders.

**27. What authority does an unelected nurse at the county have to determine policy in our school district? What exactly happened after Wednesday night's Mondovi school board meeting when the vote to change the quarantine/close contact protocol was voted 7 yes' & 0 no's to give the decision on that back to the parents of their children, etc..to then Friday late afternoon when you, at Buffalo County Health sent an email/letter, not really an official 'order' to our district parents that had originally had their child(ren) sent home due to 1 positive case in their classroom & they were considered a 'close contact' threatening if they sent their quarantined child(ren) to school that they would arrested by BCSD & held in contempt of the order, an order that we have yet to see, other than a letter. Buffalo County Sheriff's Dept didn't know anything about it & said they will not be arresting people for this. What made the decision to try to overrule the school board's decision/vote? Was it**

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**someone complaining? Did there become more positive cases?**

- a. Wis. Stat. Ch 252 and Wis. Admin. Code DHS Ch. 145 give local and state health departments the authority to control communicable diseases and contagious medical conditions by use of isolation and quarantine procedures. It also requires a school to report and help the local health officer, which includes requiring a principal or nurse serving the school or any daycare center to notify the local health officer of any cases of communicable diseases including close contacts.
- b. The email you are referring to serves as an order.

**28. Are other counties forcing schools to abide by county regulations, if so which ones?**

- a. Other school districts in Buffalo County do not have orders because they are complying with quarantine guidance. Other counties are doing what is reasonable and necessary according to their circumstances.
  - i. Each county's circumstances differ based on the support they have to enforce their orders, staff capacity, how their schools are complying, etc.
  - ii. In Buffalo County, this is what is reasonable and necessary.

**29. Where is the actual official "order"? Can I see it or get a copy of it?**

- a. The official order lays out our quarantine guidance and references the state statutes that gives the local health officer the authority to control communicable diseases.
- b. You can request a copy of a template of the order from BCDHHS by calling our main line 608-685-4412.

**30. Are teachers children still allowed to go to their parents classrooms even though the school has gone back to cohort model and it most likely is not their classroom they are in daily? They were last year and if still are what is done for sanitizing after they go to their normal classroom.**

- a. Students that accompany their parents, who are teachers, to school early are allowed to be in their parents' classrooms. It is the expectation that the parents are supervising their children before school hours begin in their own classrooms.
- b. It is not required that the teachers sanitize after their own children leave, but many teachers do. Classroom high touch points are sanitized daily.

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**31. What is done for sanitizing on a daily basis after kids have been at their lockers and not allowed to go back? If no sanitizing has been done there is still a chance that the virus could be transferred to another student after school when they get their things from the lockers to go home.**

- a. We sanitize high touch points in the school (bathrooms, doorknobs, etc.) but are not sanitizing individual lockers. Typically, the same child is touching the same locker so the lockers would not be considered high touch points.

**32. What are other schools or businesses doing nationally in regards to less invasive, fast and convenient testing for students? For example, some healthcare workers get a rapid test done 15 minutes before their shift, right at work. Is that something the school nurse could conduct or supervise to return quarantined children to school more quickly?**

- a. Mondovi School District (MSD) is not doing any onsite testing. MSD has a Memorandum of Understanding (MOU) with Advent Health, but with increasing testing requests it is not always easy or quick to receive a test.
- b. Our school nurse and staff members do not have the capacity at this time to administer on-site rapid testing.
- c. More community testing options are becoming available with increasing case numbers in the area. This information will be shared with schools and the community on a weekly basis.

**33. What at this point can we do for elementary students (that can't get vaccinated) to keep them in school without quarantining the WHOLE class?!? Or what can we do to get them back to school PRIOR to the 14 days? Just to verify: Because of space limitations in the elementary school, the only way to avoid quarantine due to a close contact is to have your child wear a mask?**

- a. Mondovi Elementary School is trying to address this issue of sending entire classrooms home. We are trying to set up seating charts and spreading out desks at least 3 feet apart. 6 feet is not feasible in the elementary school, but 3 feet would help minimize the number of children being sent home.
- b. Sending elementary children to school wearing masks would help this issue. CDC and WI DHS state that children who are both wearing masks and are at least 3 feet apart, would not have to quarantine if one tests positive.

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**34. Are the people who tested positive for covid vaccinated or unvaccinated?**

- a. We are seeing both unvaccinated and vaccinated individuals test positive in Buffalo County. We do have more individuals that are unvaccinated who are testing positive though.
- b. This exact data is not being shared on a county basis yet, but there is statewide data available.
- c. Please visit <https://www.dhs.wisconsin.gov/covid-19/vaccine-status.htm> for data related to COVID-19 Illness after Vaccination.

**35. If someone who is vaccinated comes into close contact with a positive person, do they have to quarantine, and what is the reasoning behind whether they do or do not?**

- a. Fully vaccinated individuals do not need to quarantine if they have an exposure to COVID-19. Vaccines are extremely effective at preventing serious illness, hospitalization, and death, and fully vaccinated people are less likely to get COVID-19. No vaccine is 100% effective, and we do expect some fully vaccinated individuals to test positive for COVID-19.
- b. We do recommend that those who are fully vaccinated and have a known exposure should monitor for symptoms for 14 days, get tested 3-5 days after the exposure, and wear a mask until they receive a negative test.

**36. While I understand that lessening safety measures for the vaccinated provides an incentive to get vaccinated, it isn't appropriate for a public school system to introduce such discriminatory policy. Unlike adults that can choose where they want to work, if they attend large venues or travel, these children don't have an choice of which school they go to, if they can get vaccinated, etc. We know, now, that vaccinated individuals can spread the virus no differently than an unvaccinated individual and breakout cases are very common. IF the school's position is that of SAFETY, over politics, this policy would be dismissed immediately. Mondovi Schools are acting recklessly by lessening safety measures for vaccinated children. What was the idea behind introducing such policy into a public school? Since we are finding that vaccinated people can & are spreading the virus, the same as unvaccinated people & there are many breakout cases, why are the safety measures less for vaccinated kids or staff when at school? So therefore the school is being discriminatory towards unvaccinated kids & staff. Isn't that part of our schools fundamentals or foundation? To not discriminate!?**

- a. The reasoning behind this policy was based on data and science. Vaccines are effective,

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but not 100%. We do expect some breakthrough infections, but we also expect protection from the vaccine. From the data, we are seeing less COVID-19 infections, hospitalizations, and deaths among vaccinated individuals compared to unvaccinated individuals.

- b. We are hoping that vaccines will become available to lower age groups soon.
- c. Please visit <https://www.dhs.wisconsin.gov/covid-19/vaccine-status.htm> for data related to COVID-19 Illness after Vaccination.

**37. Not sure why the vaccinated get treated different then the unvaccinated since vaccinated can carry and get covid. So why are we making different rules and basically forcing the kids to fit your agenda of getting vaccinated. They don't get the choice it is up to the parents since they are minors. And making the unvaccinated feel they are better than the unvaccinated is just setting up the kids for bullying each other. I feel the rules need to be the same no matter what. Can you explain why you make different rules?**

- a. The reasoning behind this policy was based on data and science. Vaccines are effective, but not 100%. We do expect some breakthrough infections, but we also expect protection from the vaccine. From the data, we are seeing less COVID-19 infections, hospitalizations, and deaths among vaccinated individuals compared to unvaccinated individuals.
- b. We are hoping that vaccines will become available to lower age groups soon.
- c. Please visit <https://www.dhs.wisconsin.gov/covid-19/vaccine-status.htm> for data related to COVID-19 Illness after Vaccination.

**38. Who will be paying for all of the lost wages to parents/guardians that will now be missing work for unnecessary quarantine policies? If I were to miss work do to my child having to quarantine, I would either have to use PTO or go without pay; for most families I know, this is not feasible. There are many community members that can't afford the time off of work or financially to keep their kids out of school. What are those families supposed to do? Is any consideration taken into account for when you quarantine a young child the implications it imposes on the entire family. From keeping working people from going to the job and the ripple factor that has. I have heard some parents report their jobs are at risk if they need to stay home for child care purposes during quarantine; doesn't FMLA cover their absence? Although understandably, it might be unpaid. Just curious if documentation is available for those parents who are concerned about missing work.**

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- a. Please visit <https://doa.wi.gov/Pages/WERA.aspx> for help with rent and/or utilities.
- b. Please visit <https://dcf.wisconsin.gov/ea> for help with a bill or payment.
- c. Please visit [https://www.dol.gov/agencies/whd/fmla/pandemic for COVID-19](https://www.dol.gov/agencies/whd/fmla/pandemic%20for%20COVID-19) and the Family Medical Leave Act Questions and Answers.

**39. What public health indicators would need to be met before Buffalo County Health and Human Services would recommend closing the school?**

- a. Closing school is a strategy that BCDHHS only wants to put in place if absolutely necessary, and it's not something that BCDHHS has considered doing yet.
- b. Mondovi School District was closed earlier in the year to put more mitigation strategies in place in order for less students to be exposed while they're at school so that we can keep more kids in school and safely.
- c. BCDHHS is constantly thinking about how to keep the kids and everyone in our community safe.

**40. As you've gathered, everyone has a shared goal of keeping the school open and kids in school. What is our best chance at reaching that goal?**

- a. Keeping kids in school and keeping kids safe are BCDHHS's goals. Using multiple mitigation efforts at school and in the community can help achieve these goals.
  - i. These efforts include wearing a mask, social distancing, hand hygiene, disinfecting surfaces, quarantine/isolation, vaccination, and staying home when you're sick.

**41. When young students are quarantined, and the parents have to work, most kids end up at a daycare of some sort anyway around other children. Why shouldn't they be allowed to stay in school as long as they are not showing any signs or symptoms of Covid?**

- a. People start being contagious two days before symptoms begin with COVID-19. Additionally, people can have COVID-19, be contagious, and never have any symptoms.

**42. Also, by quarantining the kids not only are we hindering their learning, but we are depriving them of the social interaction they need and deserve. The isolation these kids are being put through is not only unfair but it is truly harming the kids. These kids need to be around their peers. What are the numbers of kids that have had negative issues (i.e. depression, suicide, anxiety, social development issues, etc) as a result of being quarantined or having to learn**

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virtually?

- a. BCDHHS does not have this data at this time.
- 43. As a rural resident our internet options are awful at best making “learning” virtually extremely difficult. What do you suggest we, as parents, should do? When our kids have questions about school work we can't answer because we are not teachers, what are we supposed to do? If Buffalo County is overriding the response of the school board's recent decision, what is their recommendation and immediate solution for students who live in areas within the county that have no options for reliable internet service? Parents received a survey about internet in 2020, it was completed but we are still facing the same challenges a year later. How can students succeed academically when they cannot truly attend virtual classrooms, it takes them double the time at night to complete/submit homework and they cannot be around others due to a potential exposure?**
- a. BCDHHS would recommend you contact your school for questions related to learning accommodations.
- 44. What is the percentage of positives who's been isolated for the school district of Mondovi. I know Spring Valley School District last year quarantined approximately 630 individuals and had and estimated 3 positive cases that may have come from the school. Are we not okay accepting that we will never eradicate this disease and we need to accept some assumed risk. According to Johns Hopkins data as of this morning, 9.22.21, there has been 42,410,607 cases, and 678,407 deaths. That's a 1.59% death risk from COVID for all age groups and excluding any pre-existing conditions. What is the % Death risk for school aged children? How many kids have been hospitalized and died in Wisconsin? Vaccinated vs. unvaccinated**
- a. BCDHHS does not have capacity currently to collect this data.
  - b. Please visit <https://www.dhs.wisconsin.gov/covid-19/deaths.htm> for data related to COVID-19 Deaths.
  - c. Please visit <https://www.dhs.wisconsin.gov/covid-19/vaccine-status.htm> for data related to COVID-19 Illness after Vaccination.
- 45. If you are a Health Department, why on God’s green earth are you not telling, promoting & sharing more with people/communities all the ways to help keep themselves healthy & boost our God given amazing immune systems?? How to maintain a healthy lifestyle of diet & exercise even with CV19 not present!? But with it, even those that have underlying conditions**

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or comorbidities could & would benefit from boosting their immune systems to help fight off viruses or infections!! Why don't you promote in the 'current recommendations' on your website information on the huge benefits of Zinc, Vitamin D & Vitamin C, plus others for your immune systems!! Vitamin D deficiency is a huge factor in how CV19 & other viruses affect a person. Why am I telling you this... Shouldn't this be a huge part of your jobs being a Health Department? But instead some of your recommendations are masking, social distancing, stay safe at home & you're promoting an experimental vaccine that has had 1000's of adverse reactions & deaths from them? Most of these recommendations are making people more sick, physically, emotionally & mentally. Your department is failing our county. What has the "Health" department done to promote health. Are you mandating everyone to get their Vitamin D levels checked and offering incentives for that? Are you making sure our students lunches contain nutritionally dense foods rather than refined and processed carbohydrates. Are you making sure everyone is getting appropriate amounts of exercise as well? Are we going to get rid of bussing? Are we going to get rid of sugar? Way more deaths than covid.

- a. Please feel free to attend our Community Health Improvement Plan meeting to weigh in on BCDHHS's health priorities.
  - i. Topic: Chip Meeting 1
  - ii. Time: Sep 29, 2021 01:00 PM Central Time (US and Canada)
  - iii. <https://zoom.us/j/99965361703?pwd=OFIVTOZRNWlocHRrMnNOR1lQVjMzd09>
  - iv. Meeting ID: 999 6536 1703
  - v. Passcode: gQ3Bdg

**46. Is the County Health Department concerned about the mental health implications forcing kids to stay away, told they can't come to school and see their friends. What is the increase in Adolescent suicide rates in the state since the start of Covid vs. Pre-Covid? Isolating these kids and keeping them from being healthy and told they can't leave the home is child abuse. Mental health and suicide has increased in children with isolation, so I'm wondering how it compares to deaths from Covid and what our real concern is. All the isolation and being alone is causing severe problems in our children. Does the county not care, or are they not concerned about mental health issues in children and teens?**

- a. Currently, BCDHHS offers the Botvin LifeSkills program to 3rd-5th graders in the Fall and 6th graders in the spring. This highly effective curriculum has been proven to help increase self-esteem, develop healthy attitudes, and improve their knowledge of essential life skills – all of which promote healthy and positive personal development

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and mental health. LifeSkills Training is comprehensive, dynamic, and developmentally designed to promote mental health and positive youth development.

- b. BCDHHS also is offering SOS (signs of suicide) to all high school and middle school students this year (2021-2022) the goals of this program are:
  - i. Increasing student knowledge and adaptive attitudes about depression
  - ii. Encourage personal help-seeking and/or help-seeking on behalf of a friend
  - iii. Reduce the stigma of mental illness and acknowledge the importance of seeking help or treatment
  - iv. Engage parents and school staff as partners in prevention through “gatekeeper” education
  - v. Encourage schools to develop community-based partnerships to support student mental health
- c. BCDHHS, in partnership with the Buffalo County Partnership Council, offers 1-2 community nights a year that revolve around the topics of adverse childhood experiences (ACEs) and mental health.
  - i. They are free for all parents to attend and always recorded for parents who may not be able to attend.
- d. Please visit <https://dpi.wi.gov/sspw/mental-health/youth-suicide-prevention/youth-data> for more Suicide Prevention – Youth Data information.
- e. Please visit <https://www.dhs.wisconsin.gov/covid-19/deaths.htm> for data related to COVID-19 Deaths.

**47. If the county is going to site WI statute 252, shouldn't the entire statute be sited? 252.06(10)**

**(a) Expenses for necessary medical care, food and other articles needed for the care of the infected person shall be charged against the person or *whoever* is liable for the person support.**

**Therefore we will all need to know where the bill for these incurred expenses should be sent to? Buffalo County Health or Mondovi School District?**

**Also, this statute 252 was created during the polio outbreak, updated for HIV, and the WI Supreme Court overruled it in the legislature vs Andrea Palm case for her overreach of power, so therefore how can Buffalo County use it & not be overreaching their power?**

- a. If we are talking about a child, the bill would go to the parents. Adults are responsible for paying their own bills.
  - i. Please visit <https://doa.wi.gov/Pages/WERA.aspx> for help with rent and/or

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utilities.

- ii. Please visit <https://dcf.wisconsin.gov/ea> for help with a bill or payment.
- iii. Please visit <https://www.dol.gov/agencies/whd/fmla/pandemic-for-COVID-19> and the Family Medical Leave Act Questions and Answers.

- b. Regarding, the Palm cases, the issue was the stay-at-home order issued by Andrea Palm. They ruled that under Wis Stat. sec 227 she did not have the authority to issue a broad stay at home order affecting the whole state. They viewed her efforts as rule making which is in the authority of the Legislature. They specifically did not rule that DHS could not issue orders under Wis Stat sec 252. The Legislature issued that authority to DHS. There is nothing in the Palm decision which would limit a local health officer from issuing quarantine orders to specific individuals that have a communicable disease to prevent the transmission to others.

\*Please note that with the high volume of calls, emails, and COVID-19 response activities, you may experience a delayed response from BCDHHS. BCDHHS staff attempt to return calls and emails as soon as possible, but we ask people please be patient and leave a message if the person you are trying to reach does not answer your call the first time. If you have an emergency, please dial 911.